



## Request for Release of Plans / Company Background History

To ensure the timely release of information with public records exemption, including plans for county facilities, please complete the following form and submit, along with the written request of the interested party, to Miami-Dade County Police Detective Gisela C. Arias by fax at 305-470-3895 or e-mail at [IOC@MDPD.COM](mailto:IOC@MDPD.COM)

<b>Project:</b> <b>Contract Number:</b> <b>Dates of Contract:</b> <b>Project Manager:</b>	<b>From:</b> (mm/dd/yyyy) <b>To:</b> (mm/dd/yyyy) <b>Phone:</b> <b>Fax:</b>
<b>Property &amp; Location:</b>	
<b>Requestor:</b> (Company name as filed, address. Include telephone number & fax) <b>E:mail address:</b> <b>NOTE:</b>	<b>REQUESTOR MUST CONTACT THE WASD ID CARD SECTION FOR ACCESS REQUIREMENTS TO WASD FACILITIES BEFORE CONTRACT ORDER TO PROCEED IS ISSUED BY WASD.</b>
<b>Name(s) &amp; Date(s) of Birth of <b>all</b> Corporate Agent(s), Officer(s) &amp; Director(s)</b>	
<b>Justification</b> (types of plans & use by request)	
<b>Department:</b>	WASD
<b>Dept. Contact Person:</b> WASD Security Department (include telephone number & fax)	Aubrey Johnson 786.552.8458 Fax 786-552.8778 Jack Speers 786.552.8271 Fax 786.552.8778 E:mail: <a href="mailto:wasdid@miamidade.gov">wasdid@miamidade.gov</a>

The requesting department concurs with this request and hereby seeks authorization to issue the requested documents.

\_\_\_\_\_  
Joseph A Ruiz  
WASD Deputy Director, Operations

\_\_\_\_\_  
Date

**Reviewed/No Concerns:**

\_\_\_\_\_  
Michael Ronczkowski, Major  
050809

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Miami-Dade Police Department